



APPLICATION FORM

Montana Arts Council's

Montana Artrepreneur Program (MAP) Cohort Enrollment

NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL: _____

TELEPHONE: _____

DAY _____ CELL _____ EVENING _____

WEBSITE: _____

1. In which visual art medium do you primarily work? (Check the one area in which you feel the most accomplished.)

<input type="checkbox"/>	Clay
<input type="checkbox"/>	Fiber – weaving, spinning, knitting, etc.
<input type="checkbox"/>	Glass
<input type="checkbox"/>	Horn, Quill, Bone
<input type="checkbox"/>	Leather and rawhide
<input type="checkbox"/>	Metal
<input type="checkbox"/>	Paints – oils, watercolors, acrylics, etc.
<input type="checkbox"/>	Paper and book arts
<input type="checkbox"/>	Photography
<input type="checkbox"/>	Stone
<input type="checkbox"/>	Textiles
<input type="checkbox"/>	Willow, Rush, Straw
<input type="checkbox"/>	Wood
<input type="checkbox"/>	Other

2. What is your specific area of interest? In short, what do you make? (For example, if you checked leather as your medium, do you make saddles or do you construct leather boxes?)

3. Briefly describe how you learned your art and how long you have been practicing it.

How long have you worked in your area of concentration?

How far can you comfortably travel to the regular workshops? _____

Do you have access to: ____a computer ____ the Internet ____electronic reader

Please rate on a five-point scale (1= none, 2= little, 3= moderate, 4= above average, 5= advanced) your expertise in each of the following areas:

	Using a computer
	Working in Microsoft Office (Word, Excel)
	Using email
	Using basic math (addition, subtraction, multiplication, division)
	Writing a paragraph

Include the following attached to your application:

- 1) At least a paragraph describing your reasons for applying to be part of a MAP cohort.
- 2) A recommendation letter from a person familiar with your work.
- 3) Three photographs of your work that reflect your skill at least at the level of an emerging artist in your medium. These preferably should be digital. For each image, please provide the following information: title, medium, date created, brief description.
- 4) Your signed letter of commitment

Signature

Date

If you have questions about the program, please call (406)468-4078 to talk with the MAC Folk Arts and Market Development Specialist.

Once you have completed your application, submit it and the additional materials to: Cindy Kittredge, MAP Folk Arts and Market Development, PO Box 532, Cascade, MT, 59421 or by email to mtcreativearts@gmail.com. When your application is received, it will be reviewed and forwarded to the cohort forming nearest to you.



LETTER OF COMMITMENT
MONTANA ARTS COUNCIL MAP COHORT

The MAP (Montana Artrepreneurship Program) for artists includes attending:

- Four workshops of 10 hours each
- Up to 10 meetings additional meetings as needed

These classes will run throughout from (month) _____ to (month) _____. Besides providing as much support as possible, the classes will assist the artist develop the tools listed below. These are the tools required to be eligible for market ready certification.

Please initial the items below to confirm your commitment to the following activities in this project:

- _____ I commit to attending the required meetings which will be scheduled by the Group Leader and MAC staff.
- _____ I commit to participating in the prescribed activities which will enhance my marketing and business skills.
- _____ I commit to investing money and time in myself in order to create the tools below and enhance my art sales.
- _____ I understand that building a business in art requires an investment on my part of money and time.
- _____ I commit to applying the information received to my business of art towards the end of receiving MAP Certification.

Signature of Artist

Date

Name (printed) _____

Full Address (printed) _____

Email _____

Day Phone _____

Evening Phone _____

Cell Phone _____